

Please print or type with ELITE type - 12 characters per inch

STATE ID NUMBER

83503631

GENERATOR NAME AND MAILING ADDRESS

Oil & Solvent Process Company  
1704 West First Street  
Azusa, Ca 91702

AREA CODE PHONE NUMBER

Tel 818 334-5117

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

TRANSPORTER NO 1

Oil & Solvent Process Company  
1704 West First Street  
Azusa, Ca 91702

VEH /CONTAINER NO

EPA ID NUMBER

TRANSPORTER NO 2 ALTERNATE TSD FACILITY

VEH /CONTAINER NO

EPA ID NUMBER

TREATMENT STORAGE OR DISPOSAL (TSD) FACILITY

Omega Chemical Company  
12004 E. Whittier Blvd  
Whittier, Ca 90602

AREA CODE PHONE NUMBER

EPA ID NUMBER

PROPER US DOT SHIPPING NAME AND HAZARD CLASS

UN/NA  
NUMBER

TOTAL  
QUANTITY

INIT  
WT/VOL

CONTAINER  
NO TYPE

WASTE  
CAT NO

DISP  
METH

Hazardous Waste Liquid N.O.S.

NA 191 189

3240  
1-3-7-20 G

60  
1-70 DM

211

01

COMPONENTS

CONC RANGE  
UPPER LOWER

UNITS  
% PPM

Trichlorotrifluorethane

98

94

Methanol / Ethanol

2

0

X

Water/Dirt/oil

2

0

X

SPECIAL HANDLING INSTRUCTIONS

spill to follow after  
flush dust.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Betty Peckham / Betty Peckham

Printed or typed full name and signature

MO.

DAY

YR

2

29

84

☐ Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

DATE  
REC'D  
&  
ACCEPTED

MO.

DAY

YR

Printed or typed full name and signature Jim Hartman

2

29

84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

DATE  
REC'D  
&  
ACCEPTED

MO.

DAY

YR

Printed or typed full name and signature

DISCREPANCY INDICATION SPACE

DATE RECEIVED & ACCEPTED

EPA ID NUMBER

MO.

DAY

YR

92

29

84

Facility owner or operator. Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD Facility must complete waste number.

Omega Chemical  
Printed or typed full name and signature

CA 90422195001

TSD F SENDS THIS COPY TO DOHS WITHIN 15 DAYS